PART B - FEE(S) TRANSMITTAL

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maintenance fee notificatio				<u> </u>		
	CE ADDRESS (Note: Legibly mark-up) 2590 02/09/2004	p with any corrections of	OIPE	Note: A certificate Fee(s) Transmittal. papers. Each addition have its own certific	of mailing can only be used in This certificate cannot be used onal paper, such as an assignment ate of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, mus
Nixon Peabody I Nûx Kukun Suret Boston, MA 02110	100 Summer St	reet	APR 1 4 2004	•	Certificate of Mailing or Tran this Fee(s) Transmittal is bein e with sufficient postage for fi fail Stop ISSUE FEE address SPTO, on the date indicated be	smission
		THE STATE OF THE S	· set	Linda M.	Ginsberg//	(Depositor's name)
		~	& TRADE LA	1/2	//Xu	(Signature)
				April 2	2004	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/709,249	11/10/2000	· · · · · · · · · · · · · · · · · · ·	Alan H. Lazarus		701826-050990 3430	
TITLE OF INVENTION: N	METHOD FOR PREVENTIN	NG AND INHIBIT	ING HUMAN HLA A	ALLOIMMUNE RES	PONSE TO PLATELET TRA	NSFUSION
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE PI	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	0	\$0	\$1330	05/10/2004
EXAM	MINER	ART UN	IIT CI	LASS-SUBCLASS	7	
EWOLDT,	GERALD R	1644		424-152100	-	
CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indicat	ee address or indication of "F lence address (or Change of 0 22) attached. ion (or "Fee Address" Indica or more recent) attached. Us	Correspondence	names of up to agents OR, altern firm (having as a agent) and the na	the patent front pag 3 registered patent atively, (2) the nam- member a registere- mes of up to 2 regists. If no name is list	attorneys or ! Nixo. e of a single d attorney or 2 istered patent	n Peabody LLP
	IEE	low, no assignee d submitted under se (E	•	patent. Inclusion of tion of this form is NO Y and STATE OR Co	assignee data is only appropri OT a substitute for filing an ass OUNTRY)	ate when an assignment has ignment.
Please check the appropriate	e assignee category or catego	ries (will not be pr	inted on the patent):	□ individual 🗶	corporation or other private g	roup entity
4a. The following fee(s) are			o. Payment of Fee(s):			
☑ Issue Fee			A check in the am	ount of the fee(s) is e	nclosed.	
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Advance Order - # of	Copies 10		The Director is h Deposit Account Nu	ereby authorized by mber 50-0850	charge the required fee(s), or enclose an extra of	credit any overpayment, to
Director for Patents is reque	ested to apply the Issue Fee a	nd Publication Fee	 		l issue fee to the application ide	
(Authorized Signature)	ck (34,235)	(Date) April /	2, 2004			64 64
NOTE; The Issue Fee an	d Publication Fee (if requir	ed) will not be ac	cepted from anyone	1		902

TH FEE(S)

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TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT **(\$)** 1,360.00

Complete if Known					
Application Number	09/709,249				
Filing Date	November 10, 2000				
First Named Inventor	Alan H. Lazarus				
Examiner Name	EWOLDT, Gerald R.				
Art Unit	1644				
Attorney Docket No.	701826-50990				

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)						
X Check Credit card Money Other None 3. ADDIT						ONAL	FEE	S	
				L <u>arge</u>	Entity		Entity		
X Deposit Account:			Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
Account			1051	130	2051		Surcharge - late filing fee or oath	1	
Number Deposit				1052	50	2052		Surcharge - late provisional filing fee or	
Account Name	N	ixon Peabody LLP					400	cover sheet	
	The Director is authorized to: (check all that apply)			1053 1812	130 2.520	1053 1812		Non-English specification For filing a request for ex parte reexamination	
Charge fee(s) indicated below X Credit any overpayments			1804	920*		•	Requesting publication of SIR prior to		
X Charge any additional fee(s) or any underpayment of fee(s)			1004	920	1804	920	Examiner action		
Charge fee(s) indicated below, except for the filing fee			1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
to the above-ic	dentified deposi	it account.		1251	110	2251	55	Extension for reply within first month	
		CALCULATION		1252	420	2252		Extension for reply within second month	
1. BASIC F				1253	950	2253		Extension for reply within third month	
Large Entity Fee Fee	Fee Fee	Fee Description	Fee Paid	1254	1.480	2254		Extension for reply within fourth month	
Code (\$)	Code (\$)			1255	2,010	2255	1.005	Extension for reply within fifth month	
1001 770	2001 385	Utility filing fee		1401	330	2401	•	Notice of Appeal	
1002 340	2002 170	Design filing fee		1402	330	2402		Filing brief in support of an appeal	
1003 530	2003 265	Plant filing fee		1403	290	2403		Request for oral hearing	
1004 770	2004 385	Reissue filing fee			1,510	1451		Petition to institute a public use proceeding	
1005 160	2005 80	Provisional filing fee		1452	110	2452		Petition to revive - unavoidable	
		SUBTOTAL (1) (\$)			1,330	2453		Petition to revive - unintentional	
2. EXTRA	CLAIM FEE	S FOR UTILITY AND	REISSUE	1501		2501		Utility issue fee (or reissue)	1,330.00
		Fee from Ext <u>ra Claims below</u>		1502	480	2502		Design issue fee	
Total Claims	-20	0** = X	ļ 	1503	640	2503	320	Plant issue fee	
Independent 3** = X =			1460	130	1460	130	Petitions to the Commissioner		
Multiple Dependent =			1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
Large Entity Small Entity			1806	180	1806	180	Submission of Information Disclosure Stmt		
Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description		8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1202 18	2202	9 Claims in excess of 20		1809	770	2809	385	Filing a submission after final rejection	
1201 86	2201 4	3 Independent claims in	excess of 3	1000		2000	000	(37 CFR 1.129(a))	
1203 290	2203 14	5 Multiple dependent cla	im, if not paid	1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1204 86 2204 43 ** Reissue independent claims over original patent		1801	770	2801	385	Request for Continued Examination (RCE)			
				1802	900	1802		Request for expedited examination	\vdash
1205 18 2205 9 TREISSUE Claims in excess of 20 and over original patent					ı		of a design application	20.00	
SUBTOTAL (2) (\$)							dvance Copies	30,00	
**or number previously paid, if greater; For Reissues, see above				*Red	luced b	y Basic	Filing	Fee Paid SUBTOTAL (3) (\$)	1,360.00

(Complete (if applicable) SUBMITTED BY Registration No. Telephone 617-345-6057 34,235 David 8/Resnick Name (Print/Type) (Attorney/Agent) April 🖊 2004 Date Signature

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

LAZARUS, Alan H., et al.

Filed:

10 November 2000

Serial No.:

09/709,249

Title:

METHOD FOR PREVENTING AND INHIBITING HUMAN HLA ALLOIMMUNE RESPONSE TO

PLATELET TRANSFUSION

Examiner:

EWOLDT, Gerald R.

Group Art Unit:

1644

CERTIFICATE OF MAILING (37 C.F.R. SECTION 1.8(a))

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Linda M2 Ginsberg

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Signature of person mailing paper

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TRANSMITTAL OF PAYMENT OF ISSUE FEE (37 C.F.R. 1.311)

- 1. Applicant hereby pays the issue fee for the attached Issue Fee Transmittal PTOL-85.
- 2. Fee (37 C.F.R. 1.18(a) and (b)):

Regular

Application status is a large entity – fee:

\$1,330.00

3. Payment of fee:

Enclosed please find a check for \$1,360.00:

\$1,330.00 issue fee

\$30.00 for 10 advance copies of patent.

BOS1367819.1

In re application of:

LAZARUS, Alan H., et al.

Application No.:

09/709,249

Group No.

1644

Filed: For: 10 November 2000

Examiner:

EWOLDT, Gerald R.

METHOD FOR PREVENTING AND INHIBITING HUMAN HLA ALLOIMMUNE

RESPONSE TO PLATELET TRANSFUSION

Please charge any fee deficiencies to Deposit Account No. 50-0850.

Date: April / 1, 2004

Respectfully submitted,

David S. Resnick (Reg. No. 34,235)

NIXON PEABODY LLP 100 Summer Street

Boston, MA 02110 (617) 345-6057